4:39PM: AUG 2 4 2004 6

## PART B - FEE(5) I KANSIVIII I AL

amplete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

(703) 746-4000 or <u>Fax</u>

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed wh appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

7590

07/16/2004

J.C. PATENTS INC. 4 Venture, Suite 250 Irvine, CA 92618

08/25/2004 AWONDAF2 00000122 500710 09849132

1330.00 DA 01 FC:1501 300.00 DA 02 FC:1504 03 FC:8001 9.00 DA Note: A certificate of mailing can only be used for domestic mailings of Fee(s) Transmittal. This certificate cannot be used for any other accompany papers. Each additional paper, such as an assignment or formal drawing, m have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission I hereby certify that this Fec(s) Transmittal is being deposited with the Un States Postal Service with sufficient postage for first class mail in an cavel addressed to the Mail Stop ISSUE FEE address above, or being facsim transmitted to the USPTO (703) 746-4000, on the date indicated below.

JIAWEI HUANG (Signat 2004 (D

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 09/849.132      | 05/04/2001  | Dai-Liang Ting       | JCLA5873            | 1182             |

TITLE OF INVENTION: MULTI-DIRECTIONAL DIFFUSION-SYMMETRIC SLANT REFLECTOR

| APPLN. TYPE   | SMALL ENTITY  | ISSUE F                              | BE                           | PUBLICATION FEE   | TOTAL FEE(S) DUE               | DATE DUE                |
|---|---|--------------------------------------|------------------------------|---|--------------------------------|-------------------------|
| nonprovisional  | NO  | \$1330                               | )                            | \$300   | \$1630                         | 10/18/2004              |
| EXA   | MINER   | ART UN                               | ΙΤ                           | CLASS-SUBCLASS  | ] .                            |                         |
| AKKAPEDDI, PRASAD R   |   | 2871                                 |                              | 349-113000  | _                              |                         |
| 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. |   |                                      |                              | 2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. |                                |                         |
| 3. ASSIGNEE NAME AN   | D RESIDENCE DATA TO B                                     | E PRINTED ON T                       | HE PATEN                     | IT (print or type)  |                                |                         |
| PLEASE NOTE: Unles  | is an assignee is identified bein 37 CFR 3.11. Completion | elow, no assignee of this form is NO | data will ap<br>Fa substitut | pear on the patent. If an assig   | nce is identified below, the d | locument has been filed |

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

| AU OPTRONICS CORP.  | HSINCHU, TAIWAN   |  |  |  |  |  |  |
|---|---|--|--|--|--|--|--|
| Please check the appropriate assignee category or categories (will not be   | printed on the patent);   |  |  |  |  |  |  |
| 4a. The following fee(s) are enclosed:  | 4b. Payment of Fee(s):  |  |  |  |  |  |  |
| XIssue Fee  | ☐ A check in the amount of the fee(s) is enclosed.  |  |  |  |  |  |  |
| Publication Fee (No small entity discount permitted)  | ☐ Payment by credit card. Form PTO-2038 is attached.  |  |  |  |  |  |  |
| Advance Order - # of Copies   | 21 The Director is hereby authorized by charge the required fee(s), or credit any overpayment Deposit Account Number 50-0710 (enclose an extra copy of this form).  |  |  |  |  |  |  |
| 5. Change in Entity Status (from status indicated above)  a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. | □ b. Applicant is not claiming SMALL ENTITY status. See, e.g., 37 CFR 1.27(g)(2).   |  |  |  |  |  |  |
|   | ication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.  oted from anyone other than the applicant; a registered attorney or agent; or the assignee or other part  ark Office. |  |  |  |  |  |  |
| (Authorized Signature) (Date)   | 24/2004   |  |  |  |  |  |  |

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to proc an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to comp this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 14 Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMIT THIS FORM WITH FEE(S)

PTOL 85 (Rev 07/04) Approved for use through 04/30/2007

OMB 0651 0033 US Patent and Trademark Office; US DEPARTMENT OF COMMER